Case 19-17535-amc Doc 16 Filed 12/15/19 Entered 12/15/19 10:08:01 Desc Main Document Page 1 of 1

		Docume	ent Page 1 of :	1	
Fill in thi	s information to identify your				
Debtor 1	ADRIENNE McALLISTER				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	ing) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	EASTERN DISTRICT O	F PENNSYLVANIA		
Case nun	nber <u>19-17535</u>				☐ Check if this is an amended filing
	l Form 106H <mark>Jule H: Your Cod</mark>	ebtors			12/15
people are ill it out, a our name	e filing together, both are equ and number the entries in the e and case number (if known)	ally responsible for supp boxes on the left. Attach . Answer every question.	lying correct information the Additional Page to t	n. If more space is r his page. On the to	rate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case, o	do not list either spouse as	s a codebtor.	
□ No					
■ Ye	s				
	thin the last 8 years, have you ha, California, Idaho, Louisiana,				
■ No	. Go to line 3.				
`	s. Did your spouse, former spou	use, or legal equivalent live	with you at the time?		
in lin Form	e 2 again as a codebtor only i	f that person is a guarant	tor or cosigner. Make su	re you have listed t	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1	MICHAEL ROMAN 2305 RHAWN STREET Philadelphia, PA 19152-21	46		Schedule D, I Schedule E/F Schedule G _ MTGLQ INVEST	